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TO:

Examiner V. Hang

U.S. Patent and Trademark Office

Group Art Unit 2622

FROM:

Frank L. Cire, Reg. No. 42,419

Direct Line: 714-540-1763

RE:

U.S. Application No. 09/994,872

Atty. Docket No. 03560.002941.

FAX NO.:

571-273-8300

DATE:

May 15, 2006

NO. OF PAGES:

(including cover page)

TIME:

3:00 pm

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#### MESSAGE

Attachments: Amendment with Transmittal

Thereby certify that this correspondence is being transmitted via facaimile to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, (571) 273-8300, on

> June 12, 2006 (Date of Deposit) Frank L. Cire, Reg. No. 42,419 Name of Attorney for Applicant) June 12, 2006

> > Date of Signature

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CA MAIN 115345v1 ·

Docket No. CENTRAL FAX CENTER

JUN 1 2 2006

In re Application of:

TSUNEHIRO TSUKADA

Application No.: 09/994,872

Filed: November 28, 2001

For: INFORMATION PROCESSING APPARATUS, PRINT SYSTEM, INFORMATION PROCESSING

METHOD, AND PRINT METHOD

Examiner: V. Hang

03560.002941.

Group Art Unit: 2622

Date: June 12, 2006 (Monday)

Mail Stop Amendment THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fcc is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 25	MINUS	<b>**</b> 30	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 5	MINUS	***	- 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						-0-

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,

Frank L. Cire

Attorney for Applicant Registration No. 42,419

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

Form #120

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03560.002941.

#### PATENT APPLICATION

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	pplication of:	)	
		:	Examiner: V. Hang
<b>TSUN</b>	EHIRO TSUKADA	)	
		:	Group Art Unit: 2622
Applic	ation No.: 09/994,872	)	
		:	
Filed:	November 28, 2001	)	
		:	
For:	INFORMATION PROCESSING	)	
	APPARATUS, PRINT SYSTEM,	:	
	INFORMATION PROCESSING	)	
	METHOD, AND PRINT METHOD	) :	June 12, 2006 (Monday)

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

### **AMENDMENT**

Sir:

In response to the Office Action dated March 10, 2006, please amend the above-identified application as follows.

> I hereby certify that this correspondence is being transmitted via facsimile to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, (571) 273-8300, on Jime 12, 2006 (Monday) (Date of Deposit) Frank L. Cire (Reg. No. 42,419) (Name of Attorney for Applicant) June 12, 2006 Date of Signature

Signature